ADULT SOCIAL CARE OVERVIEW AND SCRUTINY PANEL 12 OCTOBER 2010 7.30 - 9.02 PM



Present:

Councillors Turrell (Chairman), Harrison (Vice-Chairman), Blatchford, Mrs Fleming, Phillips, Mrs Shillcock and Ms Wilson

Apologies for absence were received from:

Councillors Baily and Leake

Also Present:

Councillor Edger Simon Broad, Head of Adult Safeguarding Andrea Carr, Policy Officer (Overview and Scrutiny) Mira Haynes, Chief Officer: Older People & Long Term Conditions Zoë Johnstone, Chief Officer: Adults and Commissioning Amanda Roden. Democratic Services Assistant

13. Minutes and Matters Arising

RESOLVED that the minutes of the meeting of the Adult Social Care Overview and Scrutiny Panel held on 8 June 2010 be approved as a correct record, and signed by the Chairman.

14. Declarations of Interest and Party Whip

There were no declarations of interest relating to any items on the agenda, nor any indications that members would be participating whilst under the party whip.

15. Urgent Items of Business

There were no urgent items of business.

16. **Performance Monitoring Report**

The Chief Officer: Adults and Commissioning presented the Performance Monitoring Report (PMR) for the first quarter of 2010/11 (April to June) relating to Adult Social Care.

Work was being undertaken on the PMR for the second quarter of 2010/11 (July to September). Maintaining performance in the current climate had been challenging financially and further challenges lay ahead with changes to the Health Service and new responsibilities for Local Authorities.

The Section 75 Joint Commissioning arrangements for Intermediate Care with Berkshire Healthcare Community Services had been agreed. Following the analysis of the Personalisation pilot, further developments had been made. Reporting to the Department of Health for the first guarter had been completed.

The jobs scheme for vulnerable homes and groups had been successful. A new reporting tool had been purchased. Service Plan Actions were currently on target.

Arising from Members' questions and comments the following points were noted:

- People had attended a 'virtual' day centre at the Open Learning Centre in Bracknell whilst the Downside Resource Centre was in the process of being closed.
- The Hold Managing Authority conference at 8.9.7 of Annex C was on target.
 Managing Authorities referred to, for example, residential care homes. Best interest assessors undertook exercises to identify training needs.
- A consultation led by Simon Hendy, Chief Officer: Housing, would be undertaken with Bracknell Forest Homes to identify the needs of people aged fifty years and over in Bracknell Forest. This had been discussed at meetings of the Older People's Partnership.
- The consultation and review of Day Services in Bracknell Forest had been undertaken.
- Three GP surgeries had agreed to display information packs for carers from the Adult Social Care and Health Department. A Carers' Strategy Group meeting had been undertaken recently. GP surgeries had information boards and the aim was for all GP surgeries in Bracknell Forest to display carers' information packs. The Chief Officer: Older People and Long Term Conditions had met with a former representative of the Local Involvement Network (LINk), to undertake work to encourage GP surgeries to display carers' information packs. The update to the Carers' Information booklet was nearly complete.
- The Adult Social Care and Health Department would become aware that a carer had collected an information pack when a carer's assessment was used. Bracknell Forest Voluntary Action (BFVA) had a database of people who had received information packs. Hospitals would also be considered as venues to display carers' information packs. Advertisement of the information packs had been undertaken through the Town and Country publication and through carers' lunches and conferences.
- A Timebank Development Officer had been recruited for a project in partnership with the Princess Royal Trust to support people to join the LETS scheme. A drive would be undertaken to recruit staff for the scheme.
- Managers in Adult Social Care would undertake work with NHS Berkshire
 East to maximise the Council's influence in shaping services, such as the
 Healthspace. The combined approach with the NHS had been working well,
 specifically in relation to Intermediate Care in Bracknell Forest which had the
 lowest number of delayed discharges across East Berkshire.
- There were plans to identify volunteers for Heathlands Residential Home to provide support for activities.
- The Adult Social Care and Health Department had been liaising with the Housing and Environment sections on a review of how the Handyperson Scheme was provided. A tender process for a new scheme was currently being undertaken.

17. Adult Safeguarding Annual Report

The Head of Adult Safeguarding presented the Safeguarding Adults Annual Report 2009/10.

Progress had been made on last year's objectives. The Safeguarding Board met every two months with representatives from the health and voluntary sectors and was

working well. East Berkshire had a Safeguarding Board. Bracknell Forest's Safeguarding Board had been in place for 18 months. Staff Guidance was being drafted by the Head of Adult Safeguarding regarding the new IT system for safeguarding records.

Bracknell Forest Council had incorporated safeguarding procedures into the Personalisation agenda. There had been a 30% decrease in referrals compared to 2008/09. A good Care Governance Board was considered to be a significant factor in the decrease in referrals by not placing people in poorly performing homes. Approximately 40% of referrals had been substantiated and were processed and investigated appropriately with good outcomes for service users. The Safeguarding Adults Forum had also been successful.

The Berkshire policy and procedure regarding safeguarding was in the process of being updated into a web based version for members of the public, GPs and others to use. The objectives for 2010/11 included training to ensure the effectiveness of the web based version and to raise awareness. There was a need to ensure that external providers contracted by Bracknell Forest Council followed safeguarding procedures.

Arising from Members' questions and comments the following points were noted:

Incidents which had been unsubstantiated would remain in the care
management system but not the safeguarding system. If there was a series of
allegations relating to one care home, this would be referred to the Care
Governance Board on an institutional rather than an individual basis.

The Chairman thanked the Head of Adult Safeguarding for the presentation.

18. Deprivation of Liberty Safeguards (DoLS)

The Head of Adult Safeguarding presented the Deprivation of Liberty Safeguards (DOLS) information which included a DoLS newsletter, the DoLS Application and Authorisation Process and a Quick Reference Prompt sheet for reporting DoLS.

The purpose of the information was to raise awareness and clarify the position regarding the deprivation of liberty of service users in care homes. The newsletter would be produced on a quarterly basis and there would be a provider event in the new year. Case studies would be included in the newsletter to encourage people to contribute their experiences.

There were eight best interest assessors, rather than six. The level of applications received by Local Authorities had not matched the higher level the Department of Health had been expecting. Work would be undertaken with providers to clarify this.

Arising from Members' questions and comments the following points were noted:

- The restriction of a person's movements to protect them from harm was not
 considered to be a deprivation of liberty. The restriction would be re-assessed
 regularly. If an individual's door was kept locked or they were only allowed to
 leave their room accompanied by a member of staff, this could be considered
 to be a deprivation of their liberty. If this was considered to be in the person's
 best interests, then the restrictions may be monitored.
- There was no specific definition of deprivation of liberty. For the purposes of receiving treatment, for example in hospital, or receiving care and support, the aim was to care for people safely and well. If staff were in any doubt as to

- whether to raise the issue of deprivation of an individual's liberty, then the issue should be raised and less restrictive options may be considered.
- Deprivation of liberty would only apply when a person did not have the mental
 capacity to make decisions for themself. If a person made poor decisions or
 was slightly forgetful but still had the mental capacity to make decisions, then
 this may referred through safeguarding but not deprivation of liberty
 safeguarding.
- There was an Amber and Red alert system in relation to care homes. Alerts
 could be raised by nurses, the Care Quality Commission (CQC), when there
 was a change of manager at a care home, from other Local Authorities, family
 members or via complaints, for example. If poor support continued to be
 offered, then a care home may not be commissioned again in the future.
- The forthcoming training opportunities in relation to Deprivation of Liberty, the Mental Capacity Act and Safeguarding Adults could be attended by members of the Panel if they were interested in learning more about these issues. There would be a series of training opportunities for staff and Berkshire wide training for all care managers.

19. Equity and Excellence: Liberating the NHS

The Chief Officer: Adults and Commissioning gave an update in respect of the Equity and Excellence: Liberating the NHS White Paper which the new coalition government had issued in July 2010.

There was a series of five consultation documents regarding the White Paper posing questions as to how changes should be made in the NHS.

The White Paper detailed the abolition of Strategic Health Authorities and Primary Care Trusts (PCTs) and the delivery of a GP Consortia which would be responsible for commissioning other health services. The body entitled Health Watch would replace LINks and PALS services in relation to democracy and legitimacy in health, the regulation of health care providers and the review of arms length bodies.

There had been workshops on each of the consultation papers. GP practices in Bracknell Forest were keen to develop a local GP Consortia. Slough and Windsor and Maidenhead Local Authorities would prefer a Berkshire wide GP Consortia. The development of a GP Consortia would depend on whether a minimum population was required.

A report on the White Paper had been submitted in early October and would go to the Executive on 19 October 2010.

20. Re-Provision of Services following the closure of Downside Resource Centre

The Chief Officer: Older People and Long Term Conditions gave a presentation regarding the re-provision of services following the closure of Downside Resource Centre (DRC).

The DRC was designed to support forty people per day and was closed in November 2009 due to health and safety issues. A virtual day centre was established at the Open Learning Centre in Bracknell and was closed in August 2010 after a consultation on the future of the centre and the Executive decision to re-provide services.

The consultation revealed the most popular reasons for attending the DRC as: meeting with friends, the lunch provided at the centre, shopping trips, and trips to culture or leisure venues.

Five of the twelve staff who worked at the DRC had accepted other posts within the Adult Social Care and Health Department.

Service users had been supported through the transition for a period of six to twelve weeks. Some service users had been assessed as self funding and had chosen to arrange their own services. Twenty-one people now received a Direct Payment to join Keep Mobile and twenty-four now attended Sandhurst Day Centre for a total of fifty sessions per week. Others had chosen to attend Friends of Downside at the Look-In on Tuesdays, and two had decided to develop allotments at the South Road Allotment site.

The Disability Initiative was being sponsored with the provision of a satellite service in Bracknell Town Centre.

Arising from Members' questions and comments the following points were noted:

- Panel Members would be provided with the presentation slides on the Downside Resource Centre Re-provision by e-mail.
- No complaints had been received from service users as yet regarding the new arrangements and alternative services to the DRC.
- Service users had been supported to undertake activities which they individually wished to do.
- The local voluntary sector was being supported through the re-provision of services.
- The alternative services available were flexible and provided choice.

21. 'Staying Safe' Overview and Scrutiny Report

The Chairman presented a report of the Working Group of the Panel in relation to the review of adult safeguarding in the context of Personalisation of Adult Social Care.

The review had included a visit to West Sussex in order to compare work in Bracknell Forest with work in other areas. Nine months had been spent collecting information and progressing the review.

Arising from Members' questions and comments the following points were noted:

- An additional recommendation be added at 6.11 of the 'Staying Safe'
 Overview and Scrutiny Report for the Executive Member for Adult Services,
 Health and Housing to adopt: Consideration be given to the development of a
 Self Neglect Policy for Bracknell Forest.
- Direct Payments in Bracknell Forest could be partially saved and used on relevant services or items.
- If a service user had fluctuating mental capacity, then a long term view would be taken alongside work to understand why there was self-neglect. The Mental Capacity Act would be followed and clarification was given to the extent to which staff should support service users.
- Part of a care plan was to record changes and work undertaken with an individual. There was a system whereby care practitioner visits were recorded in a 'yellow book'.

• Risk assessments would be undertaken to identify individual risks of service users. The aim was prevention.

22. Overview and Scrutiny Progress Report

The Panel noted the bi-annual Progress Report of the Assistant Chief Executive on Overview and Scrutiny activity over the period February to August 2010 and local and national developments in Overview and Scrutiny.

23. **Work Programme 2011/12**

The Panel was invited to endorse its draft indicative Work Programme for 2011/12.

It was agreed that the following additional review items be added to the Panel's draft indicative work programme for 2011/12 for subsequent consideration:

- i) Implications of new legislation
- ii) Deprivation of Liberty Safeguards

Panel Members should advise the Chairman of any other areas of interest for consideration in the work programme for 2011/12.

24. Executive Forward Plan

The Panel noted the forthcoming items relating to Adult Social Care on the Executive Forward Plan.

CHAIRMAN